

COUNTY NEWS

ALAMEDA COUNTY

Samuel Merritt Hospital Accredited by American Medical Association—The Samuel Merritt Hospital, Oakland, has been placed on the list of hospitals approved for intern training by the Council on Medical Education and Hospitals of the A. M. A., having been notified of their accredited standing in the following letter from that Council:

"In accordance with the recommendation of the hospital committee of your State medical society, and in recognition of the splendid work and continuous improvement in progress in the Samuel Merritt Hospital, it is the pleasure of the Council on Medical Education and Hospitals to recognize your hospital as a proper hospital for the training of interns in the fifth year in medicine.

We trust that continued advancement may be your lot, and that you will always remember that we stand ready to give every assistance that will in any way make for the betterment of service, either in the care of patients or in the important work of training medical graduates.

A notice of this recognition will be published in an early number of the Journal, as well as in other publications of the American Medical Association.

Will you kindly bring this notice to the attention of the staff, the board of directors, and others who will be similarly interested?"

FRESNO COUNTY

Fresno County Medical Society (reported by John D. Morgan, secretary)—The regular meeting of the Fresno County Medical Society was held on April 3, with forty-four members present. Guests were Thomas Addis of San Francisco and H. O. Collins, Eckhart, Boudin, Fate, McClure, and Stewart.

Albion W. Hewlett, professor of medicine of Stanford Medical School, gave a clinic on Disease of the Heart and Circulatory System. Among other conditions, Hewlett presented and discussed the following: open ductus arteriosus, aortic stenosis, aneurism of aorta.

KERN COUNTY

Kern County Medical Society (reported by P. J. Cuneo, secretary)—The Society convened in regular session at Kern County General Hospital Thursday evening, March 15, with George Sabichi presiding, and one of the best attendances for some time. Dr. Veon was selected to arrange for our April meeting.

S. C. Compton presented interesting clinical cases. Hamlin presented the paper of the evening, his subject matter being "Acute Infections of the Accessory Air Spaces"; McKee lead in the discussion that followed: Hawkins gave an interesting, instructive paper; Schaper followed with demonstration of the early diagnosis of pulmonary tuberculosis.

The meeting then adjourned to our usual enjoyable supper, concluding a splendid evening.

LOS ANGELES COUNTY

(Report by Committee on Medical Education)

Los Angeles County Medical Association—The University of Southern California contemplates the establishment of a medical school as a department of the University. They requested the endorsement of the County Medical Society. The following interesting and informative report has been submitted by a committee as follows: Walter Brem, chairman; Donald J. Frick, Theodore Lyster, Percy Magan, W. A. Beckett, Sydney Burnap, Wayland Morrison, Charles D. Lockwood, George Dock,

Jarvis Barlow, William H. Gilbert, president; Harlan Shoemaker, secretary-treasurer.

Mr. Chairman and Members of the Committee on Medical Education:

Complying with your instructions, the sub-committee appointed at your first meeting has met and begs to submit herewith its report based upon the following premises:

I. The University of Southern California desires to establish a medical school in the city of Los Angeles.

II. The University of Southern California wishes the approval and support of this project by the Los Angeles County Medical Association.

III. It is the function of this committee to present for your consideration its recommendations as to the kind of medical school which would deserve your endorsement, together with such additional facts as seem pertinent to the question of medical education and the improvement of the medical service in this community.

We believe it is the birthright of the medical school to be wanted by:

1. The community in which it is to be established.

2. By the outstanding medical organization in the community.

3. By a university of good standing in educational circles.

4. By certain bodies whose activities are wholly or closely identified with the conduct and advancement of medical education, such as:

(a) The Council of Medical Education of the A. M. A.

(b) The Association of American Medical Colleges.

(c) The Carnegie Foundation.

(d) The General Education Board.

(e) The Rockefeller Foundation.

If the need of a medical school in a community is agreed upon by these various groups their moral and to some extent their financial support may confidently be counted upon, provided the program for the new school gives proper assurance of the founder's intention and ability to create and operate a Grade A school which shall conform, in terms of administration, organization, personnel, equipment, curriculum and hospital affiliations, to the best practice among the leading medical schools of the country.

Any attempt to operate a medical school which could not secure a Grade A rating by the Council on Medical Education of the A. M. A. we should look upon as prejudicial to the best interests of the local medical profession, to medical education, and to any students who might enroll in such an institution.

It has been reported without contradiction in the local papers that it was the intention of the University of Southern California to accept matriculates for the degree of Doctor of Medicine this coming September. It is our hope and our belief that this news item was without justification in fact, for it is inconceivable to us that such a course could eventuate in anything but disaster.

The complexity of modern medical education, the great expense which it entails, the difficulties which surround the task of assembling a competent faculty, the developing of a modern curriculum, the correlation of departmental activities, the securing and controlling of hospital affiliations, the creation of an adequate reference library and pathological museum, as well as the completion of a hundred other tasks essential to the proper administration and organization of a medical school would seem to offer ample reason for deferring the opening of a school until proper provision could be made for handling these varied and difficult problems.

The necessity of maintaining the standards in medical education first created by the survey of the Carnegie Foundation and ably developed their present state by the Council on Medical Education of

the A. M. A., must be obvious to all who are familiar with the work of these boards.

The far-reaching results of their efforts is reflected in the medical legislation which the various States have enacted. Already 73 per cent of the State licensing boards require the pre-medical education as prescribed by the A. M. A., and today diplomas from schools receiving a low A. M. A. rating are reported as not recognized in from forty to forty-six States.

The obvious handicap which a student incurs in graduating from any other than a Grade A school, to say nothing of lessened opportunity which he has of receiving an adequate preparation for his life's work, would indicate that a student who would knowingly select a low-rated school would not seem to be actuated by motives which are likely to insure his being an asset to his profession or to the community in which he settles.

The question of establishing a medical school in Los Angeles is so closely identified with the larger problem of a medical center that any consideration of the one naturally involves the other.

That a large medical center will ultimately be required to provide the people of this city and surrounding country with all the advantages which modern science now offers is obvious to all. Such a center should make provision for:

- (a) The care of the sick and injured.
- (b) The teaching and practice of preventive medicine.
- (c) Undergraduate teaching.
- (d) Graduate teaching.
- (e) Research in all branches of the medical science.
- (f) Training of nurses and public health workers.

A medical school with its associated teaching hospitals is the logical nucleus about which such a center should develop, and it is, therefore, of the utmost importance that the character of such a school should command the confidence of the leaders in medical education throughout the country.

An exceptional opportunity presents itself to those who are seriously and unselfishly interested in improving the medical service in this locality.

Even a cursory review of the present situation reveals a rapidly growing city and surrounding country, inadequate hospital facilities, no permanent quarters for the county's most important medical organization, deficient library facilities, no opportunity for many qualified men to continue or engage in important research problems which they are interested in, hospitals and staffs operating under conditions which involve great economic loss, no established clinics to which members of the profession from this or adjoining States may profitably come and witness new methods of technique, treatment or diagnosis, a university anxious to found a medical school, and finally, nearly if not all of the important interests back of medical education the country over have recognized and expressed the urgent need for a big constructive medical development in this city.

May we not capitalize this situation to the great advantage of the cause of better medicine and to the great good of the city of Los Angeles by uniting all of the various interests that are involved in an effort to attain a common goal.

It is the belief of this committee that once the advantages that would accrue to each institution, through participation in such a movement, are fully understood that there will be little difficulty in securing their co-operation.

Conclusions

1. The indorsement of the proposed medical school by the Los Angeles County Medical Association should be contingent upon the assurance that it will receive a Grade A rating from the outset.

2. A survey of the local medical facilities and an estimate of the future needs of the city and sur-

rounding country would be of inestimable value in giving proper direction to any new developments.

3. The establishing of an office with a competent personnel and under expert direction which could serve as a clearing house for data on medical schools, hospitals, dispensaries, public health, industrial, medicine, vocational training, including administration, organization, building and equipment, would supply the necessary information upon which to base many important decisions.

4. Liaison should be established with all of the important medical centers throughout the world.

5. It would seem proper for the Committee on Medical Education of the Los Angeles County Medical Association to take the initiative in an effort to unite all interests in a common cause and thus take a first and most important step towards the consummation of the medical development which we all so earnestly desire.

Barlow Medical Library—The fifteenth annual report of the work of the Barlow Medical Library, Los Angeles, shows that the usefulness of the library increases with each succeeding year. The library membership has grown to 190, with a gain of fifty-nine new members this year.

California Lutheran Hospital Accredited by American Medical Association—The California Lutheran Hospital, Los Angeles, has been placed on the list of hospitals approved by the Council on Medical Education and Hospitals of the A. M. A., for the training of interns, according to the following letter received by the hospital from the Council:

"In accordance with the recommendation of the hospital committee of your State medical association, and in recognition of the splendid work and continuous improvement in progress in the California Lutheran Hospital, it is the pleasure of the Council on Medical Education and Hospitals to recognize your hospital as a proper hospital for the training of interns in the fifth year in medicine.

We trust that continued advancement may be your lot, and that you will always remember that we stand ready to give every assistance that will in any way make for the betterment of service, either in the care of patients or in the important work of training medical graduates.

A notice of this recognition will be published in an early number of the Journal, as well as in other publications of the American Medical Association.

Will you kindly bring this notice to the attention of the staff, the Board of Directors, and others who will be similarly interested?"

New Administrative and Hospital Building at Soldiers' Home, Sawtelle—According to press dispatches, work has already begun on the new administrative and hospital building at the Soldiers' Home, Sawtelle. The new structure will be located directly between the present hospital annex buildings and will conform in architecture to the other wings. Administrative offices, laboratory, X-ray rooms, cafeteria, and kitchen will be included in the new unit. Patients, at present housed in temporary quarters, will be moved into the new building upon its completion, which is expected to be about the middle of June.

Pasadena's Municipal Isolation Hospital—Work is progressing on the municipal isolation hospital now being erected on South Marengo Avenue, Pasadena, on land owned by the Municipal Water Department, according to news items in the press, and will probably be completed within the next month or six weeks at a cost of \$15,000. The hospital will have rooms for eight beds; also baths and accommodations for nurses. The plans for the hospital were prepared by Myron Hunt, architect, and it is stated that the building will be of first-class construction throughout.

MONTEREY COUNTY

Monterey County Medical Society (reported by T. C. Edwards, secretary)—One of the best meetings in the history of the Monterey County Medical

Society was held in Salinas on the evening of April 6.

Eugene S. Kilgore of San Francisco filled the program for the evening. His subject was "Modern Treatment of heart Diseases," and was illustrated with lantern slides, accentuating certain points in the course of the talk. Several questions were asked by the members and answered by Dr. Kilgore.

We would suggest that more programs of county societies, given by invited physicians, might help to instill life into societies that need an awakening. Opportunities to have special physicians give special programs are published in the Journal every few months.

Monterey County Society has made arrangements to have a physician or surgeon of note at all of its meetings this year.

C. H. Halliday, the newly appointed "full time" health officer for Monterey County, was present and gave an outline of the work contemplated by him and asked that the members of the Society co-operate with him in his work.

A motion was passed by the Society calling the attention of the municipalities of the county to the advisability of having Dr. Halliday take up the health work in the cities, thus co-ordinating all the public health activities of the county.

SAN BERNARDINO COUNTY

San Bernardino County Medical Society (reported by E. J. Eytinge, secretary)—The Society met at the San Bernardino County Hospital on April 3, with thirty members and twenty guests present. The program consisted of:

1. Demonstration and discussion of two cases of: a. Nephrolithiasis. b. One case of Tuberculosis of the Genital Tract in the Male. By E. J. Eytinge. c. Microscopic Findings, and Slides. By L. D. Campbell. Discussion opened by C. G. Hilliard.

2. Urology in Children. Illustrated by lantern slides. By A. B. Cecil of Los Angeles. Discussion opened by J. A. Shreck.

Attention was called to the State Indemnity Defense Fund. Delinquent members, according to the Coverage Rules, are not protected during their period of delinquency.

SAN DIEGO COUNTY

St. Joseph's New Hospital—Towering high in the field of San Diego's present progress is the new St. Joseph's Hospital. Within this month its plans will be completed, and the actual building begin. It is the ambition of the Rt. Rev. Bishop and the Sisters of Mercy to place in the heart of San Diego a hospital embracing the latest and finest details in modern substantial and well-planned construction. The predominant aim is particularly to make it one of the best planned hospitals of the country, giving to the sick and the suffering every convenience and comfort that invention and thought have made available.

The five-acre site for the new structure lies beyond the end of Fifth street, about six hundred yards northwest of the present hospital. The approach will be by Hillcrest Drive, terminating in an oval containing a fountain and flower gardens. The building will stand six stories high on the brow of Mission Hills; the main structure, 260 feet long and forty-four feet wide, will face the west and be flanked on either side by wings one hundred feet long and forty feet wide projecting westward. The general style will be Spanish mission style with stucco finish. The construction is to be Class A, reinforced concrete with tile filler walls, absolutely fireproof, and a basement underneath the whole building.

The capacity will be 150 beds, with provision for future expansion. There will be an equal number of single and double rooms, but no wards. Each room will have its individual lavatory and cloak-closet, and will be equipped with a nurses' silent

signal system with a checking enunciator. This will enable the superintendent of nurses to note, without leaving her office, all the calls for a nurse's service throughout the hospital, and to know the moment each call is answered. A modern doctors' call system will also be installed.

On the first floor the main entrance will be into a spacious lobby suitably planned to eliminate what might seem bare and institution. This has its large open fireplace. On this floor will be the administration department; also the outpatient department in which is included a modern dispensary, medical examination, eye, ear and throat rooms, social service room, and waiting room. Also here will be found the ambulance receiving room with surgical dressing room, etc. In connection with the administration department on the main floor are the business and private offices, doctors' rest room with bath, the superintendent of nurses suite, with bath, record room, public waiting-room, and phones.

Off the main floor, in a separate central wing, is the domestic service department, containing a main kitchen, a main serving room, help and maids' dining rooms, equipped cafeteria style. The basement of the kitchen will contain a modern refrigerating plant, including an ice-making machine, various cold storage rooms, vegetable preparation rooms, and a butcher shop. The basement under the main building will contain the nurses' and staffs' dining rooms, a complete therapeutic suite, a nurses' rest and locker room, psychopathic room, auxiliary store rooms and vaults, a sterilizing suite, an autopsy suite, etc. From the refrigerating system in the basement water will be distributed to the various drinking fountains on all floors.

The second and third floors will contain private rooms and baths (single and double), various utility and sink-rooms, general bathrooms, special nurses' locker-rooms, diet kitchens, special diet-room, and two solariums on each floor.

The fourth floor will be given over to the obstetrical department which will be thoroughly modern in every respect, containing delivery rooms, husband's room, sterilizing room, and a large well-lighted nursery with airing-balcony and equipped with a washroom, linen dryers, blanket warmers, linen closet, doctors' room, labor and receiving rooms.

The operating department will occupy the fifth floor. Around the central operating foyer will be located the major and minor operating rooms, surgeons' scrub-up room, nurses' room, dressing and utensil room. This department will also contain anesthetizing and recovery rooms, a complete pathological laboratory, an X-ray operating suite of rooms with dressing rooms, etc. Some private rooms for patients will also be located on the fifth floor.

The sixth floor will be given over entirely to the Sisters' living quarters, containing a chapel, a community room, refectory, serving room, bedrooms, and roof garden.

The plans for general service aim at maximum efficiency. Food will be prepared in the main kitchen and sent to the diet kitchens on various floors by means of an automatic electric dumb-waiter, thence to be distributed from those kitchens on each floor to the patients. A passenger elevator will serve all floors, while an automatic electric bed elevator will give its special service to the surgical department.

A complete power house, to be erected northwest of the main building, will provide high pressure steam for the various sterilizers; also for a low-pressure vacuum heating system to heat the whole institution. The power house will also contain vacuum cleaning apparatus. A general incinerator will be provided in the vicinity of the power house. A new, thoroughly modern laundry and nurses' home are contemplated.

The plans for San Diego's hospital were drawn

by I. E. Loveless, architect. With such an institution built and located, as it will be, on a quiet, restful site overlooking the famous Mission Valley, and placed in the care of the gentle Sisters of Mercy, there is little to be desired for California's first and most southern city.

SAN FRANCISCO COUNTY

San Francisco County Medical Society (reported by J. H. Woolsey, secretary)—During the month of March, 1923, the following meetings were held:

Tuesday, March 6, Committee on Medicine—The present status of the treatment of leprosy. H. T. Hollman, formerly Director U. S. Leprosy Investigation Station, Honolulu.

Tuesday, March 13, General Meeting—Symposium on Allergy or Foreign Protein Sensitization. Anaphylactoid phenomena, P. J. Hanzlik; allergy in asthma and hay-fever, S. H. Hurwitz; allergy in eczema and urticaria, G. D. Culver.

Tuesday, March 20, Committee on Surgery—Head injuries—discussion of a new pathological group. H. C. Naffziger; surgery of the gall-bladder, Sterling Bunnell.

Tuesday, March 27, Committee on Eye, Ear, Nose, and Throat—Clinical meeting at the University of California Hospital.

Proceedings of the Eye, Ear, Nose, and Throat Section of the San Francisco County Medical Society, February 27, 1923, E. F. Glaser presiding (reported by F. Cordes, secretary)—Wallace B. Smith presented a paper on observations on practice of per-oral endoscopy. The paper was preceded by a brief history of the subject. Smith pointed out the necessity of a good organization in the operating room, emphasizing the fact that personal supervision of details is necessary, especially in an operating room where the personnel is changing. In children he does the procedure under ether anesthesia preceded by atropine, while in adults scopolamin and morphine usually suffice. Great emphasis was placed upon the proper position so as to make the approach easy. Ordinarily, the grasping forceps suffice, but occasionally a hook is necessary as in the case of a small rusty collar button or half a roasted peanut. The complication to be feared is that of subglottal edema, especially in children and babies. This can usually be avoided by skillful application, while unskilled manipulation, too large a tube, or too long a time may cause this complication and necessitate tracheotomy.

The attempted removal by unskilled men with improper instruments was especially condemned. The future will develop more qualified men, and the profession will become better educated to early reference of cases to the proper men.

In the discussion, Graham was interested in the additional use of scopolamin. He pointed out that the edema may be due to dilatation, but as Jackson points out, peanuts, probably because of the oil, are more apt to cause it.

Price condemned the feeding of mush, etc., in cases of a foreign body in the oesophagus in an attempt to dislodge them, as this may dislocate the foreign body to a more dangerous position. Cohn brought out the necessity of trained assistants.

Hebert told of the necessity of the X-ray; stated that Jackson did not use an anesthetic in children.

F. Cordes presented a paper on lupus vulgaris with ocular extension. The patient, over a period of nine years, developed a lupus that involved the lids and globe. Microscopic examination of the globe showed epidermoid corneal epithelium together with tubercles of the limbus and sclera. In the comment, he pointed out the severity of the disease and its marked destructive action in the lids and globe.

H. B. Graham's paper was on tuberculosis of the ear. The case reports are infrequent, due to lack of diagnosis in many cases, the positive diagnosis being difficult. Tuberculosis of the middle ear is

primarily a disease of the mucous membrane. Five distinct types are recognized:

1. The lipid form, in which there is a slow process that may extend over years. It is similar to that of the nose and throat, in many cases being a direct extension. There is no discharge, the only symptom being deafness.

2. In the second type there is an infiltration of the entire drum followed by a marked destructive ulceration. The multiple perforations described in text-books are late stages of this type in most cases. Multiple perforations are, however, not pathognomonic of tuberculosis.

3. The third type is a rare, obscure, fibrinous one. On the promontory wall there is a thick yellowish deposit in which the tubercle bacilli are found. The process usually clears with removal of the fibrosis.

4. The fourth, a polypoid type, may fill the entire middle ear. There is very little secretion and the process heals with removal of the tissue.

5. In the fifth type, the ulcerative one, there is a breaking down with spread of the ulceration from the start. This is the destructive type that may cause mastoid involvement.

The lack of pain, multiple perforation, early interference with the labyrinth, deafness with low tones retained, early incidence of facial paralysis, any of these findings should lead one to suspect tuberculosis.

Graham thinks that in most cases the infection is through the tube and that the human tubercle bacillus is responsible.

In the discussion Cohn pointed out the difficulty in obtaining the tubercle bacilli in a smear even though guinea pig inoculation may be positive. Dr. Welty emphasized the value of solid silver nitrate in the treatment of these cases.

L. S. Mace read a paper on tuberculin in tuberculous iritis. He brought out that the condemnation of tuberculin is due to its improper use. In a patient in which the active process has loaded the system with the toxin, tuberculin is of no value. Tuberculous iritis is a disease of focal origin and depends on absorption of toxins as well as metastatic inflammation. Certain forms of laryngitis, various neuralgias, and stomach symptoms belong to this class. It is necessary to study each case to uncover the lung focus. The next step is to find the specific reaction to tuberculosis. The choice of tuberculin is important, Mace obtaining the best results with the old tuberculin of Koch. The reaction must be watched carefully so as to be able to grade the treatment dosage properly. Iritis is not a local affair so that one must consider the general condition. This was illustrated by two cases. The type of tuberculosis that causes eye symptoms is the type best treated with tuberculin.

Otto Barkan pointed out that before the advent of tuberculin these patients did well on general care. So that tuberculin must be regarded as an aid where the proper hygienic treatment is not available. F. Cordes told of the results obtained at the University of California Eye Clinic in these cases under Mace's treatment.

Mace in closing emphasized the necessity of general care. In some cases where this has no effect tuberculin has been found very helpful. It is not a cure-all, but has a definite place in therapy. Its use is not that of a foreign protein alone, as these do not give a specific reaction.

Hahnemann Hospital Accredited by Council on Medical Education and Hospitals of A. M. A.—Upon the recommendation of the California Committee of the Council on Medical Education and Hospitals of the A. M. A., Hahnemann Hospital has been accredited by that body for intern purposes, and have been so notified in the following letter from the Council:

"We have received the recommendation of Dr.

W. E. Musgrave, together with other evidence of your progressive attitude and substantial improvements, and are pleased to say that your hospital has been placed on the list of hospitals approved for the training of interns. Please accept this recognition as a token of our continued interest.

"It will be a pleasure at any time to have the opportunity to assist you in the good work which you are doing not only in the care of patients but also in the important work of instructing interns.

"Kindly bring this letter of recognition to the attention of the staff and any others who may be interested."

SAN JOAQUIN COUNTY

San Joaquin County Medical Society (reported by H. S. Chapman, secretary)—The San Joaquin Society met on March 1, President Dewey Powell presiding, and the following members present: Hull, Harbert, Thompson, McCoskey, Dameron, Sander-son, Powell, McLeish, Marlin, Conzelman, McNeil, Barnes, Dozier, Holliger, Margaret Smythe, Hudson Smythe, Kaplan and Chapman. Drs. Sippy and Van Meter were guests. The speakers of the evening were Harbert of Stockton and Hull of Stockton. Harbert had as his subject, tumors of the kidneys, with presentation of a case. He discussed the source of tumors, in and about the kidney, the differential diagnosis of tumors of male and female. He next presented a patient who had been operated upon for a very large cystic kidney following a laceration of the kidney with hemorrhage, subsequent to a fall. This kidney measured 4x6 and weighed four pounds, and four ounces.

Dr. Hull spoke on abdominal tumors. He presented two specimens and pictures of several others. Both papers brought out a great deal of discussion.

SONOMA COUNTY

Sonoma County Medical Society (reported by N. Juell, secretary)—The March meeting of the society was held at the office of Alfred A. Thurlow. George DeWitt Culver read a paper on Dermatology. The society appointed a committee on hospitals and post-convention clinics to co-operate with the central committee in San Francisco. This committee is made up of Jackson Temple of Santa Rosa, Alfred A. Thurlow of Santa Rosa, and Stuart Z. Peoples of Petaluma.

STANISLAUS COUNTY

Stanislaus County Medical Society (reported by R. E. Maxwell, secretary)—The Society met at Hotel Modesto March 16, at dinner, President McPheeters presiding. Those present were De Lappe, Reamer, Finney, Mottram, Hagedorn, Bemis, Walter Smith, and Maxwell. Walter Smith gave a report of a clinical case—vascular hypertension, and Reamer on luetic infection. Both reports brought out considerable discussion.

TULARE COUNTY

Tulare County Medical Society (reported by E. R. Zumwalt, secretary)—The society met on March 17 at Hotel Johnson, Visalia, with twelve members present. Officers for 1923 were elected as follows: President, A. W. Preston, Visalia; vice-president, C. A. Tillotson, Dinuba; secretary-treasurer, E. R. Zumwalt, Tulare; delegate to State meeting, Austin Miller, Porterville; alternate, R. N. Fuller, Tulare.

The speaker of the evening was Cavins D. Hart of San Francisco, who gave a paper on Treatment of the Toxemias of Pregnancy, which was followed by a general discussion.

The committee on certified dairies reported that the list of rules had been adopted and were in the hands of the printer. Also that B. F. Longan of Tulare was ready to begin the manufacture of certified milk about the first of April, his plant to have a capacity of 300 quarts per day.

WEEK-END AT DEL MONTE VIA AUTOMOBILE

Leaving San Francisco Saturday, June 30, 1923, at 10 a. m. Returning San Francisco Monday, July 2, 1923, about 6 p. m., in time for dinner, for parties of six.

All expenses of trip including machine, driver meals on route and meals and lodging at Hotel Del Monte.

Price per person, \$30.

"Del Monte is one of California's largest and best loved resorts. It consists of a vast estate of 18,000 acres, maintained exclusively for the pleasure of its guests. It is one place in America—and probably in the world—where you can do everything or nothing. Whatsoever you choose to do, be it golf, polo, tennis, horseback riding, motoring, swimming, fishing, hunting, sailing, dancing, idling or working, can be accomplished under unsurpassed conditions of ease, comfort and luxury.

"Situated on the historic Monterey peninsula, which projects in the Pacific Ocean with the old Bay of Monterey on one side and the sapphire Bay of Carmel on the other, Del Monte combines the scenic beauty and the benefits of seaside and mountain. Added to this is an unequaled seaside climate, which varies an average of only ten degrees between winter and summer.

"Del Monte is but 125 miles southerly from San Francisco. The trip by railroad, or auto over the perfect State concrete highway, requires only approximately four hours with inspiring and picturesque scenery on all sides."

Special features are being arranged for a post-convention golf tournament on the famous Del Monte Course for Sunday morning, July 1, and possibly a polo game in the afternoon.

Reservations for this trip must be made through the American Express Company, Market and Second Streets, San Francisco, as early as possible, preferably thirty days in advance.

YOSEMITE VALLEY WEEK-END TRIPS

Leaving San Francisco Saturday June 30, 1923 at 11 p. m. and returning San Francisco, Tuesday July 3, 1923, 10:05 p. m.

All expenses of trip, Pullman berths, meals, lodging, etc., included. Price \$59.00.

Special parties of six can make arrangements to make this trip by automobile at the same rate.

Yosemite's appeal is always universal. There is no more beautiful time for viewing the spectacular cliffs and other natural wonders which have made Yosemite Valley known around the world as the Valley Incomparable.

El Capitan, Half Dome, Cathedral Spires, Bridal Veil—all these and more are to be seen at their best.

"One day in the midst of these divine glories is worth living and toiling and starving for" wrote John Muir, the great naturalist, and every day his words are echoed by visitors from almost every State and from many foreign countries, who frequently extend into weeks the stay they originally planned to make.

Among others this trip visits the following famous main points of interest. Viewing Artist Point, Inspiration Point, Signal Peak, Wawona, Mariposa Grove of Big Trees (complete tour of Grove, including Wawona Tunnel Tree, American Legion's Unknown Hero Tree, Grizzly Giant, Three Graces, Solitary Bachelor, trees named for States, Generals and Posts, etc.), Chinquapin, Bridal Veil Meadows, Mono Meadows, Ostrander Rock, Glazier Point and Overhanging Rock, the commanding viewpoint of the High Sierra Country.

Reservations for this wonderful week-end opportunity must be made through the American Express Co., Market at Second, San Francisco, as early as possible, preferably 30 days in advance.